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## TRANSMITTAL FORM

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| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> |  | <b>Application Number</b> 10/679,184<br><b>Filing Date</b> October 3, 2003<br><b>First Named Inventor</b> J.H. David Wu<br><b>Group Art Unit</b> 1644<br><b>Examiner Name</b> Michail A. Belyavskyi<br><b>Total Number of Pages in This Submission</b> 3 <b>Attorney Docket Number</b> 176/61411 (2-11141-03010) |
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### ENCLOSURES (check all that apply)

|   |   |   |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply (1 page)<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Two-Month Extension of Time Request (\$225.00)<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement (\$_____)<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Notice to File Missing Parts/ Incomplete Application (\$_____)<br><input type="checkbox"/> A copy of the Notice to File Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Declaration and Power of Attorney<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition (\$_____)<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer (\$_____)<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (\$_____) (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Application Data Sheet<br><input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures<br><input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt<br><input checked="" type="checkbox"/> Check in the amount of \$225.00<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
|---|---|---|

#### Remarks

The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                               |   |  |
|-------------------------------|---|--|
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| Signature                     | <br>Registration No. 30,727   |  |
| Date                          | May 22, 2006  |  |

### CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

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May 22, 2006  
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Jo Ann Whalen  
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